Docket No.: 104895

APPLICATION FOR UNITED STATES PACENT **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below next to my name; that
I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SPLIT SCANN	ING OPTI	CAL APPA	RATUS					
described and claimed	in the specifica	tion:			•			
Check one	т. ин органия							
*a.	attached hereto.							
b. 🗖	filed on	as Application Serial No and						
amer	nded on							•
(if ap	oplicable)	reviewed and	understand	the conte	nte of the al	nove-identi	ified application	including the
claims, as amended by	any amendmen	nt referred to a	bove.				• •	_
I acknowle	edge the duty to	disclose to t	he Office	all informa	ation known	to me to	be material to p	patentability as
defined in Title 37, Co		-		~				** * * * * * * * * * * * * * * * * * * *
Under Title provisional application	e 35 U.S. Code n(s) filed within	§ 119, the prone year prior	to this app	fits of the olication ar	following to e hereby cla	oreign appl imed:	ication(s) and/or	TUnited States
Japanese Pat	tent Applicati	on No. 10-35	59677, fil	ed on De	cember 17	, 1998		
The follow the United States of A named foreign priority	merica either (a	a) more than o	ne year pri	or to this a	application,	vention we or (b) befo	ere filed in count ore the filing date	tries foreign to of the above-
I hereby ap this application and to	transact all bus	iness in the Pa	tent and Tr	ademark C	Office:		on and revocation	on to prosecute
		Oliff, Reg. No. udson, Reg. No						
	Edward P.	Walker, Reg. l	No. 31,450	; Robert A	. Miller, Reg	g. No. 32,7	71;	
Ma	rio A. Costantir	no, Reg. No. 33	3,565; and	Caroline D	Dennison,	Reg. No.3	4,494.	
ALL CORRESPOND BERRIDGE, P.O. BO								O OLIFF &
I hereby de herein of my own kne further that these state by fine or imprisonm statements may jeopar	owledge are true ments were ma ment, or both, u	ie and that all de with the kn nder Section	statement lowledge til 1001 of T	s made on hat willful itle 18 of	information false statem the United	n and belie ents and th States Co	ne like so made	to be true; and are punishable
Typewritten Full Nam of Sole or First invente		Kousuke					Inoue	
or dole of a fist invent		Given Name		Middle	Initial		Family Nar	ne
**Inventor's Signature		Kou	uko-				Move	
**Date of Signature:		7 00 0	11		8		1999	-
			Month		Day		Year	
Residence:	Iwatsuki-shi	i		itama	•		Japan	
	City	_	Sta	te of Provi	ince		Country	
Citizenship:		Japan						
Post Office Address: (Insert complete mailing address, including country)		c/o Fuji Xerox Co., Ltd., 7-1, Funai 3-chome,						
		Iwatsuki-shi, Saitama, Japan						
*This form may be ex	_		-		-			a. is checked.
**Note to Inventor:	Please sign nam	ne exactly as it	appears at	ove and in	sert the actu	al date of s	signing.	
IF THERE IS MORE	THAN ONE IN	VENTOR US	E PAGE 2	AND PLA	CE AN "X	"HERE		